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<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Substitute for Form PTO-875						Application or Docket Number			
<b>CLAIMS AS FILED – PART I</b> <div style="display: flex; justify-content: space-around; font-size: small;"> <span>(Column 1)</span> <span>(Column 2)</span> </div>									
FOR	NUMBER FILED	NUMBER EXTRA			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY		
BASIC FEE (37 CFR 1.16(a))					RATE		RATE		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*			FEE		FEE		
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*			X \$ ____ =		X \$ ____ =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				X \$ ____ =		X \$ ____ =			
				+ \$ ____ =		+ \$ ____ =			
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		TOTAL			
<b>CLAIMS AS AMENDED – PART II</b> <div style="display: flex; justify-content: space-around; font-size: small;"> <span>(Column 1)</span> <span>(Column 2)</span> <span>(Column 3)</span> </div>									
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
	Total (37 CFR 1.16(c))	*	Minus	**	=	SMALL ENTITY	OR		
	Independent (37 CFR 1.16(b))	*	Minus	***	=	SMALL ENTITY	OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
						X \$ ____ =		X \$ ____ =	
AMENDMENT B	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ ____ =		X \$ ____ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =		X \$ ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$ ____ =		X \$ ____ =	
						+ \$ ____ =		+ \$ ____ =	
						TOTAL ADD'L FEE		TOTAL ADD'L FEE	
AMENDMENT C	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ ____ =		X \$ ____ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =		X \$ ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$ ____ =		X \$ ____ =	
						+ \$ ____ =		+ \$ ____ =	
						TOTAL ADD'L FEE		TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

**09/914976**

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	2 minus 20 =	-
INDEPENDENT CLAIMS	1 minus 3 =	-
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	2	Minus	20	= 0
	Independent	1	Minus	3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	2	Minus	20	= 0
	Independent	1	Minus	3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	28	Minus	20	= 8
	Independent	1	Minus	3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	
X\$ 9=	
X40=	
+135=	
TOTAL	

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	840
X\$18=	
X80=	
+270=	
TOTAL	840

SMALL ENTITY TYPE ☐

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	0
X80=	0
+270=	0
TOTAL ADDIT. FEE	0

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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